

COVER PAGE

A PUBLIC DOCUMENT

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Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
Lipa Guy

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

Police

Division, Board, Department, District, if applicable

Your Position

Police Permit Review Panel Member

► If filing for multiple positions, list below or on an attachment. (Do not use acronyms)

Agency: _____ Position: _____

2. Jurisdiction of Office (Check at least one box)

☐ State

☐ Judge, Retired Judge, Pro Tem Judge, or Court Commissioner
(Statewide Jurisdiction)

☐ Multi-County _____

☐ County of _____

☒ City of Los Angeles

☐ Other _____

3. Type of Statement (Check at least one box)

☒ **Annual:** The period covered is January 1, 2019, through
December 31, 2019.

☒ **Leaving Office:** Date Left 02 / 18 / 2020
(Check one circle.)

-or- The period covered is 12 / 05 / 2018, through
December 31, 2019.

☐ The period covered is January 1, 2019, through the date of
leaving office.

☐ **Assuming Office:** Date assumed _____ / _____ / _____

-or- ☒ The period covered is 12 / 05 / 2018, through
the date of leaving office.

☐ **Candidate:** Date of Election _____ and office sought, if different than Part 1: _____

4. Schedule Summary (must complete) ► Total number of pages including this cover page: 6

Schedules attached

☒ **Schedule A-1 - Investments** – schedule attached

☐ **Schedule C - Income, Loans, & Business Positions** – schedule attached

☒ **Schedule A-2 - Investments** – schedule attached

☐ **Schedule D - Income – Gifts** – schedule attached

☒ **Schedule B - Real Property** – schedule attached

☐ **Schedule E - Income – Gifts – Travel Payments** – schedule attached

-or- ☐ **None - No reportable interests on any schedule**

5. Verification

MAILING ADDRESS STREET CITY STATE ZIP CODE
(Business or Agency Address Recommended - Public Document)

100 West 1st Street, Room 1061, Stop 400 Los Angeles CA 90012

DAYTIME TELEPHONE NUMBER

EMAIL ADDRESS

(213) 486-8730

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete. I acknowledge this is a public document.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed 03/13/2020 10:32 AM
(month, day, year)

Signature Electronic Submission
(File the originally signed paper statement with your filing official.)

SCHEDULE A-1

Investments

Stocks, Bonds, and Other Interests

(Ownership Interest is Less Than 10%)

Investments must be itemized.

Do not attach brokerage or financial statements.

CALIFORNIA FORM 700

FAIR POLITICAL PRACTICES COMMISSION

Name

Guy Lipa

NAME OF BUSINESS ENTITY

OGCBX

GENERAL DESCRIPTION OF THIS BUSINESS

ETF

FAIR MARKET VALUE

☐ \$2,000 - \$10,000 ☒ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT

☒ Stock ☐ Other (Describe)
☐ Partnership ☐ Income Received of \$0 - \$499
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

____/____/19 ____/____/19
ACQUIRED DISPOSED

NAME OF BUSINESS ENTITY

PINXX

GENERAL DESCRIPTION OF THIS BUSINESS

Index Fund

FAIR MARKET VALUE

☐ \$2,000 - \$10,000 ☐ \$10,001 - \$100,000
☒ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT

☒ Stock ☐ Other (Describe)
☐ Partnership ☐ Income Received of \$0 - \$499
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

____/____/19 ____/____/19
ACQUIRED DISPOSED

NAME OF BUSINESS ENTITY

SPGP

GENERAL DESCRIPTION OF THIS BUSINESS

ETF

FAIR MARKET VALUE

☒ \$2,000 - \$10,000 ☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT

☒ Stock ☐ Other (Describe)
☐ Partnership ☐ Income Received of \$0 - \$499
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

____/____/19 ____/____/19
ACQUIRED DISPOSED

NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF THIS BUSINESS

FAIR MARKET VALUE

☐ \$2,000 - \$10,000 ☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT

☐ Stock ☐ Other (Describe)
☐ Partnership ☐ Income Received of \$0 - \$499
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

____/____/19 ____/____/19
ACQUIRED DISPOSED

NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF THIS BUSINESS

FAIR MARKET VALUE

☐ \$2,000 - \$10,000 ☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT

☐ Stock ☐ Other (Describe)
☐ Partnership ☐ Income Received of \$0 - \$499
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

____/____/19 ____/____/19
ACQUIRED DISPOSED

NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF THIS BUSINESS

FAIR MARKET VALUE

☐ \$2,000 - \$10,000 ☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT

☐ Stock ☐ Other (Describe)
☐ Partnership ☐ Income Received of \$0 - \$499
☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

____/____/19 ____/____/19
ACQUIRED DISPOSED

Comments: _____

SCHEDULE A-2
Investments, Income, and Assets
of Business Entities/Trusts
(Ownership Interest is 10% or Greater)

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
Name <u>Guy Lipa</u>

▶ 1. BUSINESS ENTITY OR TRUST

1739 Holdings LLC

Name

1739 S Shenandoah St Los Angeles, CA

Address (Business Address Acceptable)

Check one

☐ Trust, go to 2 ☒ Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF THIS BUSINESS

Holding Company and Business Consulting

FAIR MARKET VALUE

IF APPLICABLE, LIST DATE:

☐ \$0 - \$1,999	____/____/19	____/____/19
☐ \$2,000 - \$10,000	ACQUIRED	DISPOSED
☐ \$10,001 - \$100,000		
☒ \$100,001 - \$1,000,000		
☐ Over \$1,000,000		

NATURE OF INVESTMENT

☐ Partnership ☒ Sole Proprietorship ☐ _____ Other

YOUR BUSINESS POSITION Principle

▶ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)

☐ \$0 - \$499	☒ \$10,001 - \$100,000
☐ \$500 - \$1,000	☐ OVER \$100,000
☐ \$1,001 - \$10,000	

▶ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)

☒ None or ☐ Names listed below

▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST

Check one box:

☐ INVESTMENT ☐ REAL PROPERTY

Name of Business Entity, if Investment, or
Assessor's Parcel Number or Street Address of Real Property

Description of Business Activity or
City or Other Precise Location of Real Property

FAIR MARKET VALUE

IF APPLICABLE, LIST DATE:

☐ \$2,000 - \$10,000	____/____/19	____/____/19
☐ \$10,001 - \$100,000	ACQUIRED	DISPOSED
☐ \$100,001 - \$1,000,000		
☐ Over \$1,000,000		

NATURE OF INTEREST

☐ Property Ownership/Deed of Trust ☐ Stock ☐ Partnership

☐ Leasehold _____ ☐ Other _____
Yrs. remaining

☐ Check box if additional schedules reporting investments or real property are attached

▶ 1. BUSINESS ENTITY OR TRUST

Parallel Capital LLC

Name

550 S Hill St #1648, Los Angeles, CA 90013

Address (Business Address Acceptable)

Check one

☐ Trust, go to 2 ☒ Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF THIS BUSINESS

Real Estate Investment Company

FAIR MARKET VALUE

IF APPLICABLE, LIST DATE:

☐ \$0 - \$1,999	____/____/19	____/____/19
☐ \$2,000 - \$10,000	ACQUIRED	DISPOSED
☐ \$10,001 - \$100,000		
☐ \$100,001 - \$1,000,000		
☒ Over \$1,000,000		

NATURE OF INVESTMENT

☒ Partnership ☐ Sole Proprietorship ☐ _____ Other

YOUR BUSINESS POSITION Founding Partner

▶ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)

☐ \$0 - \$499	☒ \$10,001 - \$100,000
☐ \$500 - \$1,000	☐ OVER \$100,000
☐ \$1,001 - \$10,000	

▶ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)

☐ None or ☒ Names listed below

SEE ATTACHED

▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST

Check one box:

☐ INVESTMENT ☒ REAL PROPERTY

SEE ATTACHED

Name of Business Entity, if Investment, or
Assessor's Parcel Number or Street Address of Real Property

4109 Tilden Ave Culver City, CA 90323

Description of Business Activity or
City or Other Precise Location of Real Property

FAIR MARKET VALUE

IF APPLICABLE, LIST DATE:

☐ \$2,000 - \$10,000	____/____/19	____/____/19
☐ \$10,001 - \$100,000	ACQUIRED	DISPOSED
☐ \$100,001 - \$1,000,000		
☒ Over \$1,000,000		

NATURE OF INTEREST

☒ Property Ownership/Deed of Trust ☐ Stock ☐ Partnership

☐ Leasehold _____ ☐ Other _____
Yrs. remaining

☒ Check box if additional schedules reporting investments or real property are attached

Comments: _____

SCHEDULE A-2

Attachment

CALIFORNIA FORM700

FAIR POLITICAL PRACTICES COMMISSION

Name

Guy Lipa

BUSINESS ENTITY OR TRUST : Parallel Capital LLC

LIST OF REPORTABLE SINGLE SOURCES OF INCOME OF \$10,000 OR MORE

Sale of 1710 S Garth St Los Angeles, CA 90035

Names of Business Entities, if Investments, or Assessor's Parcel Numbers or Street Addresses of Real Properties

4109 Tilden Ave Culver City, CA 90232

SCHEDULE B
Interests in Real Property
(Including Rental Income)

Name

Guy Lipa

► ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS

744 S Mansfield

CITY

Los Angeles, CA 90036

FAIR MARKET VALUE

- ☐ \$2,000 - \$10,000
☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000
☒ Over \$1,000,000

IF APPLICABLE, LIST DATE:

____/____/19 ACQUIRED ____/____/19 DISPOSED

NATURE OF INTEREST

- ☒ Ownership/Deed of Trust ☐ Easement
☐ Leasehold _____ Yrs. remaining ☐ _____ Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED

- ☐ \$0 - \$499 ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☒ \$10,001 - \$100,000 ☐ OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.

☐ None

SEE ATTACHED

► ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS

CITY

FAIR MARKET VALUE

- ☐ \$2,000 - \$10,000
☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000
☐ Over \$1,000,000

IF APPLICABLE, LIST DATE:

____/____/19 ACQUIRED ____/____/19 DISPOSED

NATURE OF INTEREST

- ☐ Ownership/Deed of Trust ☐ Easement
☐ Leasehold _____ Yrs. remaining ☐ _____ Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED

- ☐ \$0 - \$499 ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☐ OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.

☐ None

* You are not required to report loans from a commercial lending institution made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

INTEREST RATE

TERM (Months/Years)

_____% ☐ None

HIGHEST BALANCE DURING REPORTING PERIOD

- ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☐ OVER \$100,000
☐ Guarantor, if applicable

NAME OF LENDER*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

INTEREST RATE

TERM (Months/Years)

_____% ☐ None

HIGHEST BALANCE DURING REPORTING PERIOD

- ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☐ OVER \$100,000
☐ Guarantor, if applicable

Comments: _____

SCHEDULE B

Attachment

CALIFORNIA FORM700

FAIR POLITICAL PRACTICES COMMISSION

Name

Guy Lipa

ASSESSOR PARCEL NUMBER OR STREET ADDRESS : 744 S Mansfield

LIST OF SOURCES OF RENTAL INCOME OF \$10,000 OR MORE

Jennifer Sky , Jeorgia Whittaker, Renee Albert, Christopher Lutz, Madalyn Lorber, Brooke Kilander, Olivia Keogh, Madalyn Mccarty